

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

DEMOCRATS FOR EDUCATION REFORM

ADDRESS (number and street)

10 G STREET NE SUITE 710

☐ Check if different than previously reported. (ACC)

WASHINGTON

DC

20002

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00417733

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☒ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
09 01 2014

through

M M M / D D D / Y Y Y Y Y Y
09 30 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Joe Williams

Signature of Treasurer

Joe Williams

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 20 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

DEMOCRATS FOR EDUCATION REFORM

Report Covering the Period: From: M M / D D / Y Y Y Y Y 09 / 01 / 2014 To: M M / D D / Y Y Y Y Y 09 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2014		37160.51
(b) Cash on Hand at Beginning of Reporting Period.....	12768.34	
(c) Total Receipts (from Line 19)	17825.00	42329.94
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	30593.34	79490.45
7. Total Disbursements (from Line 31)	13289.47	62186.58
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	17303.87	17303.87
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	912.33	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

DEMOCRATS FOR EDUCATION REFORM

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	01	/	2014

To:

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	17500.00	40000.00
(ii) Unitemized	325.00	741.19
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	17825.00	40741.19
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	17825.00	40741.19
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	760.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	828.75
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	828.75
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	17825.00	42329.94
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	17825.00	41501.19

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	2372.19
(ii) Non-Federal Share.....	0.00	2372.19
(b) Other Federal Operating Expenditures	619.47	19912.20
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	619.47	24656.58
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9180.00	34040.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	3490.00	3490.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	13289.47	62186.58
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13289.47	59814.39

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	17825.00	40741.19
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17825.00	40741.19
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	619.47	22284.39
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	760.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	619.47	21524.39

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATS FOR EDUCATION REFORM

Full Name (Last, First, Middle Initial)

A. Jill Braufman

Mailing Address 4 East 66th Street

City
New York

State Zip Code
NY 10065

FEC ID number of contributing
federal political committee.

C

Name of Employer
Center for Arts Education

Occupation
Chair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11AI.4508

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Richard M. Burnes Jr.

Mailing Address 16 Acorn Street

City
Boston

State Zip Code
MA 02108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Charles River Ventures

Occupation
Founding Member

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11AI.4510

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Paige Daly

Mailing Address 17 E. 84th Street #9A

City
New York

State Zip Code
NY 10028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Harvest Partners

Occupation
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 21 / 2014

Transaction ID : SA11AI.4512

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

11000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

DEMOCRATS FOR EDUCATION REFORM

Full Name (Last, First, Middle Initial)

A. Kenneth M. Hirsh

Mailing Address 114 W. 13th Street

City
New York

State Zip Code
NY 10011

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 21 / 2014

Transaction ID : SA11AI.4559

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Raphael Musher

Mailing Address 9 Montague Terrace

City
Brooklyn

State Zip Code
NY 11201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Stax

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11AI.4499

Amount of Each Receipt this Period

1000.00

Conduit: Democracy Engine PAC

Full Name (Last, First, Middle Initial)

C. Scott Pearson

Mailing Address 3038 Macomb Street NW

City
Washington

State Zip Code
DC 20008

FEC ID number of contributing
federal political committee.

C

Name of Employer

DC PCSB

Occupation

Government Employee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11AI.4497

Amount of Each Receipt this Period

500.00

Conduit: Democracy Engine PAC

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6500.00

17500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 17

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

DEMOCRATS FOR EDUCATION REFORM

Full Name (Last, First, Middle Initial)

A. ACTBLUE

Mailing Address P.O. BOX 382110

City	State	Zip Code
CAMBRIDGE	MA	02238

FEC ID number of contributing federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2014

Transaction ID : SA11C.4494

Amount of Each Receipt this Period

25.00

Total Received Through Conduit This Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. DEMOCRACY ENGINE, INC., PAC

Mailing Address 850 QUINCY STREET, NW #402

City	State	Zip Code
WASHINGTON	DC	20011

FEC ID number of contributing federal political committee.

C C00468314

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2014

Transaction ID : SA11C.4492

Amount of Each Receipt this Period

1800.00

Total Received Through Conduit This Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 17

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATS FOR EDUCATION REFORM

Full Name (Last, First, Middle Initial)

A. Democracy Engine LLC

Mailing Address 850 Quincy Street NW #402

City Washington State DC Zip Code 20011

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 10 / 2014

Transaction ID : SB21B.4520

Amount of Each Disbursement this Period

4.30

Full Name (Last, First, Middle Initial)

B. Democracy Engine LLC

Mailing Address 850 Quincy Street NW #402

City Washington State DC Zip Code 20011

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2014

Transaction ID : SB21B.4521

Amount of Each Disbursement this Period

69.20

Full Name (Last, First, Middle Initial)

C. Education Reform Now Advocacy

Mailing Address 928 Broadway #505

City New York State NY Zip Code 10010

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 10 / 2014

Transaction ID : SB21B.4533

Amount of Each Disbursement this Period

473.64

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

547.14

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 17

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATS FOR EDUCATION REFORM

Full Name (Last, First, Middle Initial)

A. Charles Barone

Mailing Address 2 South Avolyn B

City State Zip Code
 Ventnor City NJ 08406

Purpose of Disbursement
 Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
 09 10 2014

Transaction ID : SB21B.4533.0

Amount of Each Disbursement this Period

75.51

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Jennifer Koppel

Mailing Address 5002 Lodge View Lane

City State Zip Code
 Austin TX 78731

Purpose of Disbursement
 Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
 09 10 2014

Transaction ID : SB21B.4533.2

Amount of Each Disbursement this Period

305.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Melody Thelosen

Mailing Address 312 Jasper Peak Ct.

City State Zip Code
 Lafayette CO 80026

Purpose of Disbursement
 Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
 09 10 2014

Transaction ID : SB21B.4533.3

Amount of Each Disbursement this Period

25.17

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 17

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATS FOR EDUCATION REFORM

Full Name (Last, First, Middle Initial)

A. Global Payments

Mailing Address 10 Glenlake Parkway NE North Tower

City Atlanta State GA Zip Code 30328

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 03 2014
Transaction ID : SB21B.4515

Amount of Each Disbursement this Period

72.75

Full Name (Last, First, Middle Initial)

B. Perkins Coie

Mailing Address 700 13th Street NW Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 08 2014
Transaction ID : SB21B.4519

Amount of Each Disbursement this Period

237.50

Full Name (Last, First, Middle Initial)

C. Perkins Coie

Mailing Address 700 13th Street NW Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 29 2014
Transaction ID : SB21B.4546

Amount of Each Disbursement this Period

302.50

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

612.75

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 17

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATS FOR EDUCATION REFORM

Full Name (Last, First, Middle Initial)

A. Trilogy Interactive LLC

Mailing Address P.O. Box 4177

City State Zip Code
Mountain View CA 94040

Purpose of Disbursement
Less In-kinds to Candidates, See Schedule B, Lines 23 and 29

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 16 2014
Transaction ID : SB21B.4550

Amount of Each Disbursement this Period

-570.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-570.00

589.89

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 17

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATS FOR EDUCATION REFORM

Full Name (Last, First, Middle Initial)

A. CORY BOOKER FOR SENATE

Mailing Address PO BOX 32237

City NEWARK	State NJ	Zip Code 07102
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Purpose of Disbursement
Contribution

Candidate Name

CORY A BOOKEROffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: NJ District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

Transaction ID : SB23.4530

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. MARK PRYOR FOR US SENATE

Mailing Address PO BOX 2720

City LITTLE ROCK	State AR	Zip Code 72203
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Purpose of Disbursement
Contribution

Candidate Name

MARK LUNSFORD PRYOROffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: AR District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		18		2014

Transaction ID : SB23.4543

Amount of Each Disbursement this Period

4800.00

Full Name (Last, First, Middle Initial)

C. MOULTON FOR CONGRESS COMMITTEE

Mailing Address PO BOX 2013

City SALEM	State MA	Zip Code 01970
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Purpose of Disbursement
Contribution

Candidate Name

SETH MOULTONOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: MA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		12		2014

Transaction ID : SB23.4540

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8800.00

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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

DEMOCRATS FOR EDUCATION REFORM

Category/
Type

Age Group	Number of People
0-10	10
11-20	15
21-30	20
31-40	25
41-50	30
51-60	35
61-70	40
71-80	45
81-90	50
91-100	190.00

MM / DD / YYYY

Category/
Type

Age Group	Number of People
0-14	10
15-24	10
25-34	10
35-44	10
45-54	10
55-64	10
65-74	10
75-84	10
85-94	190.00
95-104	10

Category/
Type

A diagram of a rectangular frame. It consists of a horizontal beam at the top and a horizontal beam at the bottom, connected by vertical supports. The top beam has several small rectangular protrusions along its length. The bottom beam has several small rectangular protrusions along its length. The vertical supports are represented by short vertical lines connecting the top and bottom beams.

380.00

TOTAL This Period (last page this line number only).....

9180.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATS FOR EDUCATION REFORM

Full Name (Last, First, Middle Initial)

A. Friends of Lanier Echols

Mailing Address 322 River Villa Way

City	State	Zip Code
Indianapolis	IN	46208

Purpose of Disbursement
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

Transaction ID : SB29.4528

Amount of Each Disbursement this Period

1100.00

Full Name (Last, First, Middle Initial)

B. Kelly Bentley for IPS

Mailing Address 4629 Cornelius Avenue

City	State	Zip Code
Indianapolis	IN	46208

Purpose of Disbursement
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

Transaction ID : SB29.4529

Amount of Each Disbursement this Period

1100.00

Full Name (Last, First, Middle Initial)

C. Sullivan for Indiana

Mailing Address 315 W. Walnut Street

City	State	Zip Code
Indianapolis	IN	46202

Purpose of Disbursement
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

Transaction ID : SB29.4523

Amount of Each Disbursement this Period

1100.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3300.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 17

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATS FOR EDUCATION REFORM

Full Name (Last, First, Middle Initial)

A. Trilogy Interactive LLC

Mailing Address P.O. Box 4177

City	State	Zip Code
Mountain View	CA	94040

Purpose of Disbursement
In-kind: Internet Solicitation--Marshall Tuck/CA

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	16	/	2014

Transaction ID : SB29.4553

Amount of Each Disbursement this Period

190.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

190.00

3490.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 17 OF 17

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

DEMOCRATS FOR EDUCATION REFORM

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Gourmet Garage

Nature of Debt (Purpose):

Catering

Mailing Address 155 W. 66th Street

City State

Zip Code

New York

NY

10023

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4547

Amount Incurred This Period

912.33

Payment This Period

0.00

Outstanding Balance at Close of This Period

912.33

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

912.33

2) **TOTALS** This Period (last page this line number only)..... ►

912.33

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

912.33